

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	PROGNOSIS, DIAGNOSIS AND TREATMENT OF BONE MARROW DERIVED STEM CELL ASSOCIATED CANCER
Attorney Docket Number::	UMY-043
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	Yes
Petition included?::	No
Licensed US Govt. Agency::	NIH
Contract or Grant Numbers::	RO1CA87958-01 & K22CA96485-02
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Timothy
Middle Name::	C.
Family Name::	WANG
City of Residence::	Acton
State or Province of Residence::	MA
Country of Residence::	US

Street of mailing address:: 33 Stoneymeade Way  
City of mailing address:: Acton  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01720

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jeanmarie  
Family Name:: HOUGHTON  
City of Residence:: North Grafton  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 16 Morgan Drive  
City of mailing address:: North Grafton  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 01536

**Correspondence Information**

Correspondence Customer Number:: 00959

**Representative Information**

Representative Customer Number:: 00959

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/464084	04/18/03
This Application	An application claiming the benefit under 35 USC 119(e)	60/504576	09/18/03

### Assignee Information

Assignee name:: UNIVERSITY OF MASSACHUSETTS  
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 26th Floor  
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 Postal or Zip Code of mailing address:: 02108